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B1 (Official Form 1)(04/13)				oarmone	α	go <u> </u>					
	United S			ruptcy t of Ohio					Vol	untary	Petition
Name of Debtor (if individua Nekic, Kenneth A	l, enter Last, First,	Middle):			Name	of Joint De	ebtor (Spouse)	) (Last, First	, Middle):		
All Other Names used by the (include married, maiden, and	Debtor in the last 8	3 years					used by the J maiden, and			years	
DBA James Herriot Memorial Veterinary Hospital					(meru)	ac married,	marden, and	trade names	<i>,</i> -		
Last four digits of Soc. Sec. of (if more than one, state all)	r Individual-Taxpa	yer I.D. (I	TIN)/Com	plete EIN	Last fo	our digits o than one, state	f Soc. Sec. or	Individual-	Гахрауег I.I	D. (ITIN) No	o./Complete EIN
Street Address of Debtor (No. 364 E Whittier St Columbus, OH	and Street, City, a	nd State):			Street	Address of	Joint Debtor	(No. and Str	reet, City, ar	nd State):	
			4	ZIP Code <b>43206</b>							ZIP Code
County of Residence or of the Franklin	Principal Place of	Business	:		Count	y of Reside	ence or of the	Principal Pla	ace of Busin	iess:	
Mailing Address of Debtor (if	different from stre	et address	s):		Mailir	ng Address	of Joint Debte	or (if differe	nt from stree	et address):	
			Г	ZIP Code							ZIP Code
Location of Principal Assets of (if different from street address)	of Business Debtor is above):		•		_						
Type of Debt (Form of Organization) (C				of Business			•	of Bankrup			ch
Individual (includes Joint  See Exhibit D on page 2 of th  Corporation (includes LLC  Partnership  Other (If debtor is not one of check this box and state type	Debtors) is form. C and LLP)  It the above entities,	Sing in 11 Railr Stock Com	th Care Bu le Asset Re U.S.C. § 1 coad kbroker modity Bro ring Bank	siness eal Estate as 101 (51B)	defined	☐ Chapt ☐ Chapt ☐ Chapt ☐ Chapt ☐ Chapt ☐ Chapt	er 7 er 9 er 11 er 12	of □ Cl of	hapter 15 Pe a Foreign M hapter 15 Pe a Foreign M	etition for R Main Procee etition for R	eding lecognition
Chapter 15 Del		Othe		mpt Entity					e of Debts k one box)		
Country of debtor's center of mai Each country in which a foreign by, regarding, or against debtor is	proceeding	under	(Check box or is a tax-ex Title 26 of	, if applicable empt organiz the United St I Revenue Co	e) ation ates	defined "incurr	are primarily co I in 11 U.S.C. § ed by an indivi- onal, family, or I	101(8) as dual primarily	for		s are primarily ess debts.
Ü	ee (Check one box	)			one box:		-	ter 11 Debt			
■ Full Filing Fee attached □ Filing Fee to be paid in install attach signed application for t debtor is unable to pay fee exform 3A. □ Filing Fee waiver requested (a attach signed application for t	he court's consideration cept in installments. In applicable to chapter	on certifyir Rule 1006(l 7 individua	ng that the o). See Officuls only). Mu	ial Check in	Debtor is not if: Debtor's agging less than all applicable A plan is bein Acceptances	a small busing regate nonco \$2,490,925 (each boxes: no filed with of the plan w		defined in 11 United debts (exc to adjustment	J.S.C. § 101(5) cluding debts on 4/01/16 a	51D). owed to insid nd every thre	ders or affiliates) se years thereafter). editors,
Statistical/Administrative In  ■ Debtor estimates that fund □ Debtor estimates that, afte there will be no funds ava-	s will be available r any exempt prope	erty is exc	luded and	administrati		es paid,		THIS	SPACE IS F	OR COURT	USE ONLY
Estimated Number of Creditor	200-	] 1,000- 5,000	5,001- 10,000	10,001- 25,000	25,001- 50,000	50,001- 100,000	OVER 100,000				
\$50,000 \$100,000 \$500,	001 to \$500,001 S 000 to \$1	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion				
Estimated Liabilities	001 to \$500,001 S 000 to \$1	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion					

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**B1** (Official Form 1)(04/13) Page 2 Name of Debtor(s): Voluntary Petition Nekic, Kenneth A (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Case Number: Date Filed: Location Where Filed: Southern District of Ohio, eastern division 12-60361 12/06/12 Case Number: Date Filed: Location Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) I, the attorney for the petitioner named in the foregoing petition, declare that I (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition.  $\mathbf{X}$  /s/ Karen E. Hamilton June 24, 2015 Signature of Attorney for Debtor(s) (Date) Karen E. Hamilton 0064808 Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

B1 (Official Form 1)(04/13) Document Page 3 of 52

## **Voluntary Petition**

(This page must be completed and filed in every case)

### Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

### X /s/ Kenneth A Nekic

Signature of Debtor Kenneth A Nekic

 $\mathbf{X}$ 

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

June 24, 2015

Date

### Signature of Attorney\*

### X /s/ Karen E. Hamilton

Signature of Attorney for Debtor(s)

### Karen E. Hamilton 0064808

Printed Name of Attorney for Debtor(s)

### The Law Firm of Karen E. Hamilton

Firm Name

31 E. Whittier St Columbus, OH 43206

Address

## Email: karen@karenhamiltonlaw.net

1-614-443-7920 Fax: 1-614-443-7922

Telephone Number

June 24, 2015

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

### **Signature of Debtor (Corporation/Partnership)**

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Name of Debtor(s):

Nekic, Kenneth A

### **Signatures**

### Signature of a Foreign Representative

Page 3

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

<b>T</b> 7
X
Z3

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

### Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

<b>T</b>
v

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

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B 1D (Official Form 1, Exhibit D) (12/09)

## United States Bankruptcy Court Southern District of Ohio

In re	Kenneth A Nekic		Case No.	
		Debtor(s)	Chapter	13

# EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] \_\_\_\_

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]

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B 1D (Official Form 1, Exhibit D) (12/09) - Cont.	Page 2
1 ,	109(h)(4) as impaired by reason of mental illness or mental nd making rational decisions with respect to financial
• •	109(h)(4) as physically impaired to the extent of being n a credit counseling briefing in person, by telephone, or
☐ Active military duty in a military co	ombat zone.
☐ 5. The United States trustee or bankruptcy a requirement of 11 U.S.C. § 109(h) does not apply in t	administrator has determined that the credit counseling this district.
I certify under penalty of perjury that the i	information provided above is true and correct.
Signature of Debtor:	/s/ Kenneth A Nekic
	Kenneth A Nekic
Date: June 24, 2015	

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B6 Summary (Official Form 6 - Summary) (12/14)

## **United States Bankruptcy Court** Southern District of Ohio

In re	Kenneth A Nekic		Case No		
_		Debtor ,			
			Chapter	13	

## SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	375,000.00		
B - Personal Property	Yes	3	24,935.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		290,652.52	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	3		96,675.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	3		19,851.85	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			15,000.00
J - Current Expenditures of Individual Debtor(s)	Yes	2			11,000.00
Total Number of Sheets of ALL Schedu	ıles	18			
	T	otal Assets	399,935.00		
			Total Liabilities	407,179.37	

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B 6 Summary (Official Form 6 - Summary) (12/14)

## **United States Bankruptcy Court** Southern District of Ohio

In re	Kenneth A Nekic		Case No		
-		, Debtor			
			Chapter	13	

## STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C.  $\S$  159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	11,000.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	85,675.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	96,675.00

### State the following:

Average Income (from Schedule I, Line 12)	15,000.00
Average Expenses (from Schedule J, Line 22)	11,000.00
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)	12,443.50

### State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY"     column		0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	96,675.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		19,851.85
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		19,851.85

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B6A (Official Form 6A) (12/07)

In re	Kenneth A Nekic	Case No.	
-		Debtor	

### **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

1	Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim

Sub-Total > 375,000.00 (Total of this page)

375,000.00

Total >

**0** continuation sheets attached to the Schedule of Real Property

(Report also on Summary of Schedules)

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B6B (Official Form 6B) (12/07)

In re	Kenneth A Nekic	Case No.	
		Debtor	

### SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
1.	Cash on hand	Cash	-	200.00
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	Chase Business checking	-	11,000.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X		
4.	Household goods and furnishings, including audio, video, and computer equipment.	household goods	-	300.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	x		
6.	Wearing apparel.	wearing apparel	-	200.00
7.	Furs and jewelry.	x		
8.	Firearms and sports, photographic, and other hobby equipment.	x		
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X		
10.	Annuities. Itemize and name each issuer.	x		
			Sub-Tota	al > <b>11,700.00</b>

2 continuation sheets attached to the Schedule of Personal Property

(Total of this page)

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B6B (Official Form 6B) (12/07) - Cont.

In re	Kenneth A Nekic	Case No.
_		Debtor

## SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

	(Continuation Sheet)		
Type of Property  N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.			
	erriot Memorial Veterinary Hospital 100% urgical Equipment,Table,Crates all used for	-	4,500.00
14. Interests in partnerships or joint ventures. Itemize.			
15. Government and corporate bonds and other negotiable and nonnegotiable instruments.			
16. Accounts receivable. Account	s Receivable	-	4,235.00
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.			
	(Total	Sub-Tota of this page)	al > <b>8,735.00</b>

Sheet <u>1</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In re	Kenneth A Nekic	Case No
		•

Debtor

## **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
22.	Patents, copyrights, and other intellectual property. Give particulars.	Х			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.		1997 Toyota 4 Runner	-	1,000.00
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.		Medicine & PET food INVENTORY used for business	-	3,500.00
31.	Animals.	X			
32.	Crops - growing or harvested. Give particulars.	X			
33.	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	X			
35.	Other personal property of any kind not already listed. Itemize.	X			

Sub-Total > 4,500.00 (Total of this page)

Total >

24,935.00

Sheet **2** of **2** continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

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B6C (Official Form 6C) (4/13)

In re	Kenneth A Nekic	Case No.
		,

Debtor

### SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled u (Check one box)  11 U.S.C. \$522(b)(2)  11 U.S.C. \$522(b)(3)	er: Check if debtor claims a homestead exemption that exceeds \$155,675. (Amount subject to adjustment on 4/1/16, and every three years there with respect to cases commenced on or after the date of adjustment.)						
Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption				
Real Property 364-368 E. Whittier St Columbus, Ohio 43206	Ohio Rev. Code Ann. § 2329.66(A)(1)	84,347.48	375,000.00				
<u>Cash on Hand</u> Cash	Ohio Rev. Code Ann. § 2329.66(A)(3)	75.00	200.00				
Checking, Savings, or Other Financial Accounts, C Chase Business checking	ertificates of <u>Deposit</u> Ohio Rev. Code Ann. § 2329.66(A)(18) Ohio Rev. Code Ann. § 2329.66(A)(3)	682.00 375.00	11,000.00				
<u>Household Goods and Furnishings</u> household goods	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	300.00	300.00				
Wearing Apparel wearing apparel	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	200.00	200.00				
Stock and Interests in Businesses James Herriot Memorial Veterinary Hospital 100% owner Surgical Equipment,Table,Crates all used for business	Ohio Rev. Code Ann. § 2329.66(A)(5) Ohio Rev. Code Ann. § 2329.66(A)(18)	2,325.00 543.00	4,500.00				
Automobiles, Trucks, Trailers, and Other Vehicles 1997 Toyota 4 Runner	Ohio Rev. Code Ann. § 2329.66(A)(2)	1.000.00	1.000.00				

Total: 89,847.48 392,200.00

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B6D (Official Form 6D) (12/07)

In re	Kenneth A Nekic	Case No.
-		Debtor

### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Hu H W J C	sband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED,  NATURE OF LIEN, AND  DESCRIPTION AND VALUE  OF PROPERTY  SUBJECT TO LIEN	CONTINGENT	UNLLQULDAL	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No.  Patterson Veterinary Supply Inc c/o Mark J Sheriff Atty at law #2 Miranova Place, Suite 700 Columbus, OH 43215		_	Judgment Lien  364-368 E. Whittier St Columbus, Ohio 43206		A T E D			
Account No.	┢	H	Value \$ 375,000.00 2006	Н		$\vdash$	20,652.52	0.00
Ronald B Hager 5003 Birch Grove Dr Groveport, OH 43125		_	Mortgage  364-368 E. Whittier St Columbus, Ohio 43206  Value \$ 375,000.00				270,000.00	0.00
Account No.			Value \$				270,000.00	0.00
Account No.			Value \$					
continuation sheets attached		<u> </u>		ubto			290,652.52	0.00
			(Report on Summary of Sc	To	ota	1	290,652.52	0.00

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B6E (Official Form 6E) (4/13)

In re	Kenneth A Nekic	Case No.	
-		Debtor ,	

### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

Domestic support obl
----------------------

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

### ☐ Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

### ☐ Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

### ☐ Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

### ☐ Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$6,150\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

### ☐ Deposits by individuals

Claims of individuals up to \$2,775\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

### Taxes and certain other debts owed to governmental units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

### ☐ Commitments to maintain the capital of an insured depository institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

### ☐ Claims for death or personal injury while debtor was intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B6E (Official Form 6E) (4/13) - Cont.

In re	Kenneth A Nekic		Case No.
-		Debtor ,	

## SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

### **Domestic Support Obligations**

TYPE OF PRIORITY UNLLQULDATED CODEBTOR Husband, Wife, Joint, or Community AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, ONTINGENT SPUTED AND MAILING ADDRESS Н DATE CLAIM WAS INCURRED **AMOUNT** INCLUDING ZIP CODE, W AND CONSIDERATION FOR CLAIM OF CLAIM AMOUNT ENTITLED TO PRIORITY C J AND ACCOUNT NUMBER (See instructions.) Child Support Account No. Michelle R Isroff 0.00 98 E Moler Columbus, OH 43207 11,000.00 11,000.00 Account No. Account No. Account No. Account No. Subtotal 0.00 Sheet 1 of 2 continuation sheets attached to (Total of this page)

Schedule of Creditors Holding Unsecured Priority Claims

11,000.00

11,000.00

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B6E (Official Form 6E) (4/13) - Cont.

In re	Kenneth A Nekic	Case No
_		, Debtor

### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts
Owed to Governmental Units

TYPE OF PRIORITY Husband, Wife, Joint, or Community UZLLQULDATED AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, ODEBTOR ONTINGENT S P U T E D AND MAILING ADDRESS Н DATE CLAIM WAS INCURRED **AMOUNT** INCLUDING ZIP CODE, W AND CONSIDERATION FOR CLAIM OF CLAIM AMOUNT ENTITLED TO PRIORITY AND ACCOUNT NUMBER C (See instructions.) taxes Account No. City of Columbus 0.00 **Income Tax Division** 50 West Gay St 4th floor Columbus, OH 43215 3,000.00 3,000.00 **Property Taxes** Account No. Franklin County Treasurer 0.00 373 S. High St. 17th Floor Columbus, OH 43215-6306 42,675.00 42,675.00 2007 to 2013 taxes Account No. **Internal Revenue Service** 0.00 PO Box 7346 Philadelphia, PA 19101-7346 X 40,000.00 40,000.00 income tax Account No. State of Ohio Department of Taxation Unknown **Bankruptcy Division** PO Box 530 Columbus, OH 43216 Unknown Unknown Account No. Subtotal 0.00 Sheet **2** of **2** continuation sheets attached to (Total of this page) 85,675.00 Schedule of Creditors Holding Unsecured Priority Claims 85,675.00 Total 0.00

(Report on Summary of Schedules)

96,675.00

96,675.00

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DOF (	Official	LOLIII	OL)	(12/07

In re	Kenneth A Nekic		Case No.	
-		Debtor	.,	

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	C	U	Ţ	₽Τ	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	C A M		COZHLZGEZ	QU	1	U T F	AMOUNT OF CLAIM
Account No. xxxxxx7320		Т	Opened 5/01/09	⊢ N T	ΙT	l	t	
			FactoringCompanyAccount At T Mobility		E	l		
Afni, Inc. Attn: Bankruptcy Po Box 3097 Bloomington, IL 61702		-						390.00
Account No. xxxx0880			Opened 8/30/06 Last Active 3/07/12	+	╁	ŀ	+	330.00
Bk Of Amer Attn: Bankruptcy/MC: NC4-105-03-14 Po Box 26012 Greensboro, NC 27410		-	Deficiency Balance					Unknown
Account No.		t	2001	+	T	t	十	
Columbus Surgical Associates Inc PO Box 182255 Columbus, OH 43218		-	Lawsuit					340.00
	_			+	╀	+	4	340.00
Account No.  Internal Revenue Service PO Box 21126 Philadelphia, PA 19114		_	2007 taxes					13,649.00
continuation sheets attached			(Total of	Sub			,]	14,379.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Kenneth A Nekic	Case No.
_		Debtor

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

		1		1.	1	-	1
CREDITOR'S NAME,	0	Hu	sband, Wife, Joint, or Community		N	D	
MAILING ADDRESS	CODEBTO	Н	DATE CLAIM WAS INCURRED AND	N	UNLI	S P	
INCLUDING ZIP CODE, AND ACCOUNT NUMBER	ВТ	W	CONSIDERATION FOR CLAIM. IF CLAIM	I N	Q	U T E	AMOUNT OF CLAIM
(See instructions above.)	O R	С	IS SUBJECT TO SETOFF, SO STATE.	Ğ	Ĭ D	Ė	ANOCH OF CEARIN
	<u> ``</u>	₽	0 1 0/04/00 1 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	CONTINGENT	A T E	٦	
Account No. xxx7003	1		Opened 6/01/06 Last Active 1/01/08 Lease	'	Ė		
l			Lease	$\vdash$	15	-	1
Leasesource - Lsi Llc							
132 W 31st St Fl 14		-					
New York, NY 10001							
							2,100.00
4007	┞	_	Oallandian Amaran fan Williams Familia Madiaina	_	<u> </u>		2,100.00
Account No4267	ł		Collection Agency for Village Family Medicine				
Meade & Assocates	l						
737 Enterprise Dr.		l_					
Columbus, OH 43081							
							87.00
Account No. xxxxxx8823	t		Opened 8/01/12	T	H		
	1		FactoringCompanyAccount T-Mobile				
Midland Funding							
8875 Aero Dr		-					
San Diego, CA 92123							
							709.00
Account No. xx2111			Med1 02 Medical Payment Data				
Nemo's Coll							
14631 N Cave Creek		l_					
Phoenix, AZ 85022							
1 110011X, A2 00022							
							144.00
Account No. xxxxxx1339	t	H	Opened 11/01/08	$\dagger$	H	H	
	1		CollectionAttorney National Processing Co.				
Nevada Professional Co			100- 3				
10601 Grant Rd Ste 214		-					
Houston, TX 77070							
	1						
							190.00
Sheet no. 1 of 2 sheets attached to Schedule of		_		Sub	tota	ıl	2 222 22
Creditors Holding Unsecured Nonpriority Claims			(Total of	his	pag	ge)	3,230.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Kenneth A Nekic	Case No	
_		Debtor	

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Hu H W J C	sband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
Account No.			2006 taxes	'	Ę		
State of Ohio Department of Taxation Bankruptcy Division PO Box 530 Columbus, OH 43216		-					2,242.85
Account No.	T		Deficiency Balance		Т		
US Bank PO Box 6345 Fargo, ND 58125-6345		_					
							Unknown
Account No.							
Account No.	╀				⊬	-	
ACCOUNT INO.	1						
Sheet no. <b>2</b> of <b>2</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims		•	(Total of t	Subt			2,242.85
Creations Holding Offsecured Nonphority Claims			(Total of t		pag Γota		
			(Report on Summary of So				19,851.85

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B6G (Official Form 6G) (12/07)

In re	Kenneth A Nekic	Case No.
_		, Debtor

### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract. Case 2:15-bk-54161 Doc 1 Filed 06/25/15 Entered 06/25/15 10:15:20 Desc Main Document Page 21 of 52

B6H (Official Form 6H) (12/07)

In re	Kenneth A Nekic		Case No.	
		Debtor	<b>-</b> ,	

### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

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Fill	in this information to identify your	case:					
Del	otor 1 Kenneth A	Nekic	_				
_	otor 2 puse, if filing)						
Uni	ted States Bankruptcy Court for th	e: SOUTHERN DISTRIC	CT OF OHIO				
	se number nown)		-		ck if this is: an amende a suppleme 3 income a		tition chapter ate:
0	fficial Form B 6I				/IM / DD/ Y	_	
S	chedule I: Your Inc	ome			, 22, .		12/13
atta		On the top of any additi	ith you, do not include information in a pages, write your name and				
١.	information.		Debtor 1		Debtor 2	? or non-filing spoເ	ise
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	■ Employed		☐ Employed		
		Employment status	☐ Not employed		☐ Not employed		
		Occupation	Owner/Veterinarian				
	Include part-time, seasonal, or self-employed work.	Employer's name	James Herriot Memorial Veterinary Hospit				
	Occupation may include student or homemaker, if it applies.	Employer's address	364 E Whittier St Columbus, OH 43206				
		How long employed t	here? 24 years				
Par	t 2: Give Details About Mo	nthly Income					
spou If yo	use unless you are separated.	nore than one employer, c	you have nothing to report for any ombine the information for all emplo				_
	,,	<del></del>		For De	btor 1	For Debtor 2 or non-filing spous	se
2.	List monthly gross wages, sala deductions). If not paid monthly,				0.00	\$ <b>N</b>	<u>/A</u>

Official Form B 6I Schedule I: Your Income page 1

0.00

0.00

N/A

N/A

Estimate and list monthly overtime pay.

Calculate gross Income. Add line 2 + line 3.

Depti	or 1	Kenneth A Nekic	_	Case	number (if known)		
				For	Debtor 1		ebtor 2 or iling spouse
	Сор	y line 4 here	4.	\$	0.00	\$	N/A
5.	List	all payroll deductions:					
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	N/A
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A
	5e.	Insurance	5e.	\$	0.00	\$	N/A
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A
	5g.	Union dues	5g.	\$	0.00	\$	N/A
	5h.	Other deductions. Specify:	5h.+	\$	0.00	+ \$	N/A
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	N/A
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	N/A
8.	8b. 8c. 8d. 8e. 8f. 8g. 8h.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  Interest and dividends  Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation  Social Security  Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  Pension or retirement income  Other monthly income. Specify:	8c. 8d. 8e.	\$\$ \$\$\$ \$\$\$	0.00 0.00 0.00 0.00 0.00 0.00 0.00	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	N/A N/A N/A N/A N/A N/A
9.		all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.		\$	15,000.00	\$	N/A
10	Cala	vulate monthly income. Add line 7 , line 2	10. \$		5,000.00 + \$		N/A = \$ 15,000.00
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.   φ_	13	5,000.00 + \$_		N/A = \$ 15,000.00
11.	State Inclu	e all other regular contributions to the expenses that you list in Schedul ude contributions from an unmarried partner, members of your household, you refriends or relatives.  not include any amounts already included in lines 2-10 or amounts that are no	ır depen		•		chedule J. 11. +\$ <b>0.00</b>
12.		the amount in the last column of line 10 to the amount in line 11. The ree that amount on the Summary of Schedules and Statistical Summary of Certies					12. \$15,000.00 Combined
13.	Do y ■	you expect an increase or decrease within the year after you file this form  No.  Yes Explain:	n?				monthly income

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Fill	in this informa	ation to identify yo	our case:							
Debt						Ch	eck if	thic ic:		
Debi	101 1	Kenneth A N	ekic					amended filing		
Debt	tor 2					H		0	ving post-petition ch	antar
	ouse, if filing)				_	Ц			the following date:	aptei
Unite	ed States Bankr	ruptcy Court for the:	SOUTH	ERN DISTRICT OF OHI	0		MM	/ DD / YYYY		
Case	e numbe <b>r</b>					П	A se	enarate filing for	r Debtor 2 because	Debtor
	nown)								rate household	Dobtoi
Of	ficial Fo	rm B 6J								
		J: Your I	_ Exner	292						12/13
Be a info nun	as complete a ormation. If m nber (if know	and accurate as nore space is ne n). Answer ever	s possible. eded, atta ry question	If two married people ch another sheet to thi						ct
Pari	t 1: Descr Is this a joir	ibe Your House	hold							
	■ No. Go to		in a separ	ate household?						
	□N		·							
			st file a sep	parate Schedule J.						
2.	Do you have	e dependents?	□ No							
	Do not list D and Debtor 2		Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor			Dependent's age	Does dependent live with you?	
	Do not state	the			_			_	□ No	
	dependents'	names.			Son		;	5	Yes	
									□ No	
									☐ Yes	
									□ No	
									☐ Yes	
									□ No	
_	_								☐ Yes	
3.	expenses o	penses include f people other tl d your depende	han nts? □	No Yes						
Part		ate Your Ongoi			vou ere using this f	orm oc o	cupple	amont in a Chr	ontor 12 ages to re-	oort
exp				uptcy filing date unless y is filed. If this is a su						
				government assistance cluded it on <i>Schedule I</i> .						
	ficial Form 6I							Your expe	enses	
4.		or home owners		ses for your residence. r lot.	Include first mortgage	e 4.	\$		0.00	
	If not include	led in line 4:								
	4a. Real e	estate taxes				4a.	\$		1,050.00	
		rty, homeowner's	s, or renter	's insurance		4b.			0.00	
		•		ipkeep expenses		4c.			0.00	
		owner's associat	•			4d.			0.00	
5.	Additional r	nortgage payme	ents for yo	our residence, such as h	nome equity loans	5.	\$		0.00	

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Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: od and housekeeping supplies ildcare and children's education costs othing, laundry, and dry cleaning rsonal care products and services dical and dental expenses insportation. Include gas, maintenance, bus or train fare. not include car payments. tertainment, clubs, recreation, newspapers, magazines, and books aritable contributions and religious donations urance.	6a. 6b. 6c. 6d. 7. 8. 9. 10. 11.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 0.00 0.00 0.00 475.00 0.00 56.00 27.00
Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: od and housekeeping supplies ildcare and children's education costs othing, laundry, and dry cleaning rsonal care products and services dical and dental expenses unsportation. Include gas, maintenance, bus or train fare. not include car payments. tertainment, clubs, recreation, newspapers, magazines, and books aritable contributions and religious donations	6b. 6c. 6d. 7. 8. 9. 10. 11.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 0.00 0.00 475.00 0.00 56.00 27.00
Telephone, cell phone, Internet, satellite, and cable services Other. Specify:  od and housekeeping supplies ildcare and children's education costs othing, laundry, and dry cleaning rsonal care products and services dical and dental expenses unsportation. Include gas, maintenance, bus or train fare. not include car payments. tertainment, clubs, recreation, newspapers, magazines, and books aritable contributions and religious donations	6c. 6d. 7. 8. 9. 10. 11.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 0.00 475.00 0.00 56.00 27.00
Other. Specify:  od and housekeeping supplies ildcare and children's education costs othing, laundry, and dry cleaning rsonal care products and services dical and dental expenses insportation. Include gas, maintenance, bus or train fare. not include car payments. tertainment, clubs, recreation, newspapers, magazines, and books aritable contributions and religious donations	6d. 7. 8. 9. 10. 11.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 475.00 0.00 56.00 27.00
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ildcare and children's education costs othing, laundry, and dry cleaning rsonal care products and services dical and dental expenses insportation. Include gas, maintenance, bus or train fare. not include car payments. tertainment, clubs, recreation, newspapers, magazines, and books aritable contributions and religious donations	8. 9. 10. 11.	\$ \$ \$ \$	0.00 56.00 27.00
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not include car payments. tertainment, clubs, recreation, newspapers, magazines, and books aritable contributions and religious donations			
tertainment, clubs, recreation, newspapers, magazines, and books aritable contributions and religious donations			
aritable contributions and religious donations	13.	· .	200.00
		\$	100.00
urance.	14.	\$	0.00
not include insurance deducted from your pay or included in lines 4 or 20.	45.	<b>c</b>	
a. Life insurance	15a.		0.00
o. Health insurance	15b. 15c.	·	0.00
c. Vehicle insurance			177.00
	150.	\$	0.00
	16.	\$	950.00
·			330.00
	17a.	\$	0.00
			0.00
		·	0.00
		· · · · · · · · · · · · · · · · · · ·	0.00
• • •		·	
	18.	\$	870.00
ner payments you make to support others who do not live with you.		\$	0.00
	19.		
			0.00
			0.00
		· -	0.00
			0.00
			0.00
		•	0.00
	21.	· -	425.00
			6,000.00
			550.00
ter business		+\$	95.00
ur monthly expenses. Add lines 4 through 21.	22.	\$	11,000.00
e result is your monthly expenses.		-	· · · · · · · · · · · · · · · · · · ·
culate your monthly net income.			
a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	15,000.00
o. Copy your monthly expenses from line 22 above.	23b.	-\$	11,000.00
	230	\$	4,000.00
	id. Other insurance. Specify:  Ixes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Decify:  Self employment tax  stallment or lease payments:  Id. Car payments for Vehicle 1  Id. Car payments for Vehicle 2  Id. Other. Specify:  Id. Other specify:  Id.	id. Other insurance. Specify:    15d.     16.     15d.     16.     16.     16.     17a.     17a.     17b.     17c.     17d.     1	ixes. Do not include taxes deducted from your pay or included in lines 4 or 20.  ixes. Do not include taxes deducted from your pay or included in lines 4 or 20.  ixes. Do not include taxes deducted from your pay or included in lines 4 or 20.  ixes. Do not include taxes deducted from your pay or included in lines 4 or 20.  ixes. Do not include taxes deducted from your pay or included in lines 4 or 20.  ixes. Do not include taxes deducted from your pay or included in lines 4 or 20.  ixes. Car payments for Vehicle 1  ixes. Car payments for Vehicle 2  ixes. Car payments for Vehicle 1  ixes. Car payments of derease in your expenses within the year after you file this form?  ixes. Car payments for Vehicle 1  ixes. Car payments for Vehicle 1  ixes. Car payments for Vehicle 1  ixes. Car payments of a film. Sampents  ixes. Car payments of a film. Sampents  ixes. Car payment of the file. Sampents  ixes. Car payments of A

Yes. Explain:

The debtor is now living in the Veterinary Hospital has no personal living expenses

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**B6 Declaration (Official Form 6 - Declaration).** (12/07)

## **United States Bankruptcy Court** Southern District of Ohio

In re	Kenneth A Nekic			Case No.					
			Debtor(s)	Chapter	13				
	DECLARATION CONCERNING DEBTOR'S SCHEDULES								
	DECLARATION UNDER F								
	I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of <b>20</b> sheets, and that they are true and correct to the best of my knowledge, information, and belief.								
Date	June 24, 2015	Signature	/s/ Kenneth A Nekic						
			Kenneth A Nekic						
			Debtor						

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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B7 (Official Form 7) (04/13)

## United States Bankruptcy Court Southern District of Ohio

In re	Kenneth A Nekic		Case No.	
		Debtor(s)	Chapter	13

### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

### 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$75,856.00 2015 YTD: Debtor James Herriot Memorial Veterinary Hospit \$160,000.00 2014: Debtor James Herriot Memorial Veterinary Hospit \$51,102.00 2013: Debtor James Herriot Memorial Veterinary Hospit

### 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

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### 3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR DATES OF PAYMENTS

AMOUNT PAID

AMOUNT STILL OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225\*. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATES OF PAID OR PAYMENTS/ VALUE OF TRANSFERS TRANSFERS

NAME AND ADDRESS OF CREDITOR

None c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL OWING

AMOUNT STILL

OWING

### 4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER NATURE OF PROCEEDING

COURT OR AGENCY AND LOCATION STATUS OR DISPOSITION

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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### 5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER

DATE OF REPOSSESSION. FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF **PROPERTY** 

#### 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN

NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER

DESCRIPTION AND VALUE OF

**PROPERTY** 

### 7. Gifts

None

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

### 8. Losses

None П

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

car accident hit by a uninsured motorist

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

5-2015

\$2500.00 in damage

DATE OF LOSS

### 9. Payments related to debt counseling or bankruptcy

None 

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

The Law Firm of Karen E. Hamilton 31 E. Whittier St Columbus, OH 43206

DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR 6-2015

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY \$1,000.00 attorney fee, \$35.00 credit report,\$310.00 filing fee

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### 10. Other transfers

None

NA

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE,

RELATIONSHIP TO DEBTOR

DATE **6-22-15** 

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

1996 Ford Van \$150.00

**Junk Yard** 

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled

trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE DATE(S) OF TRANSFER(S)

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

IN PROPERTY

### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

NAME AND ADDRESS OF INSTITUTION

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

### 14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

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### 15. Prior address of debtor

None 

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

**ADDRESS** 902 Mohawk Col, Ohio

NAME USED **Kenneth A Nekic**  DATES OF OCCUPANCY

8-06 to 8-2012

### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF

**ENVIRONMENTAL** 

NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF

**ENVIRONMENTAL** 

NOTICE

None

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

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### 18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO.

TAXPAYER-I.D. NO.
(ITIN)/ COMPLETE EIN ADDRESS NATURE OF BUSINESS ENDING DATES

veterinary

James Herriot Memorial Veterinary Hospit

morial Veterinary Columbus, OH 43206

Home care Mobile Veterinary 2003 to present

364 E. Whittier St

**Vet Service** 

NAME

None b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

### 19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS **Tami Weisinberger** 

DATES SERVICES RENDERED present

2008 to present

b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME ADDRESS DATES SERVICES RENDERED

None

None

c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME ADDRESS

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B7 (Official Form 7) (04/13)

7

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

#### 20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

None b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

#### 21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

### 22 . Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME ADDRESS DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

### 23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

### 24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

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### 25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

\*\*\*\*

### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date June 24, 2015

Signature /s/ Kenneth A Nekic
Kenneth A Nekic
Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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## **LBR Form 2016-1(b)**

## UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF OHIO

n re: Kenneth A Nekic		Case No.
Remedia A Neric		Chapter 13
	Debtor(s)	Judge

## DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR AND APPLICATION FOR ALLOWANCE OF FEES IN CHAPTER 13 CASE

### Dicelocuro

١.	. Disclosure					
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. R. Bankr. P. 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is a follows:					
	For legal services, I have agreed to accept \$	3,500.00				
	Prior to the filing of this statement I have received \$	1,000.00				
	Balance Due \$ _	2,500.00				
2.	<ul><li>The source of the compensation paid to me was:</li><li>■ Debtor □ Other (specify):</li></ul>					
3.	3. The source of compensation to be paid to me is:					
	■ Debtor □ Other (specify):					
4.	4. I have not agreed to share the above-disclosed compensation with any other persons un associates of my law firm.	less they are members and/or				
	☐ I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.					

#### II. **Application**

- I hereby apply for an allowance of fees in the amount set forth above. I understand and agree that the Court may approve, without itemization, an allowance of fees not to exceed \$3,500, for rendering the legal services set forth below. If I seek payment of fees in excess of \$3,500, I will file a separate application that sets forth the total amount of the fee requested, and that includes an itemization of all legal services performed, the hourly rate at which the services were performed, and the actual time spent by the case attorney, any other attorney, paralegal or professional person for whom fees are sought. Any request for reimbursement of expenses shall include an itemization of the expenses.
  - a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether, and under what chapter, to file a petition in bankruptcy;
  - Preparation and filing of any petition, schedules, statement of affairs and amendments thereto that may be required; b.
  - Preparation and filing of chapter 13 plan, and any pre-confirmation amendments thereto that may be required; c.
  - Preparation and filing of payroll orders and amended payroll orders; d.
  - Representation of the debtor at the meeting of creditors and confirmation hearing; and any continued hearings thereof; e.
  - f. Filing of address changes;
  - Routine phone calls and questions; g.
  - Review of claims: h.
  - Review of notice of intention to pay claims; i.
  - Preparation and filing of objections to non-real estate and non-tax claims; j.

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- k. Preparation and filing of first motion to suspend or reduce payments;
- 1. Preparation and filing of debtor's certification regarding issuance of discharge order; and
- m. Any other duty as required by local decision or policy.

Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

June 24, 2015

Date

/s/ Karen E. Hamilton

Karen E. Hamilton
Signature of Attorney

0064808
The Law Firm of Karen E. Hamilton
31 E. Whittier St
Columbus, OH 43206
1-614-443-7920

Fax: 1-614-443-7922

karen@karenhamiltonlaw.net

## UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF OHIO

## NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

## <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over

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Form B 201A, Notice to Consumer Debtor(s)

Page 2

a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

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B 201B (Form 201B) (12/09)

### United States Bankruptcy Court Southern District of Ohio

	S	outhern District of Ohio		
In re	Kenneth A Nekic		Case No.	
		Debtor(s)	Chapter 1	3
		F NOTICE TO CONSUM b) OF THE BANKRUPT	•	5)
Code.	I (We), the debtor(s), affirm that I (we) have re	Certification of Debtor eceived and read the attached no	otice, as required by §	§ 342(b) of the Bankruptcy
Kenne	eth A Nekic	X /s/ Kenneth A	Nekic	June 24, 2015
Printe	d Name(s) of Debtor(s)	Signature of D	ebtor	Date
Case N	No. (if known)	X		
		Signature of Jo	oint Debtor (if any)	Date

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

Afni, Inc. Attn: Bankruptcy Po Box 3097 Bloomington, IL 61702

Bk Of Amer Attn: Bankruptcy/MC: NC4-105-03-14 Po Box 26012 Greensboro, NC 27410

City of Columbus Income Tax Division 50 West Gay St 4th floor Columbus, OH 43215

Columbus Surgical Associates Inc PO Box 182255 Columbus, OH 43218

Franklin County Treasurer 373 S. High St. 17th Floor Columbus, OH 43215-6306

Internal Revenue Service PO Box 21126 Philadelphia, PA 19114

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346

Leasesource - Lsi Llc 132 W 31st St Fl 14 New York, NY 10001

Meade & Assocates 737 Enterprise Dr. Columbus, OH 43081

Michelle R Isroff 98 E Moler Columbus, OH 43207

Midland Funding 8875 Aero Dr San Diego, CA 92123

Nemo's Coll 14631 N Cave Creek Phoenix, AZ 85022

Nevada Professional Co 10601 Grant Rd Ste 214 Houston, TX 77070 Patterson Veterinary Supply Inc c/o Mark J Sheriff Atty at law #2 Miranova Place, Suite 700 Columbus, OH 43215

Ronald B Hager 5003 Birch Grove Dr Groveport, OH 43125

State of Ohio Department of Taxation Bankruptcy Division PO Box 530 Columbus, OH 43216

US Bank PO Box 6345 Fargo, ND 58125-6345

Fill in this information to identify your case:				
Debtor 1 Kenneth A Nekic				
Debtor 2 (Spouse, if filing)				
United States Bankruptcy Court for the: Southern District of Ohio				
Case number (if known)				

Chec	Check as directed in lines 17 and 21:							
According to the calculations required by this Statement:								
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).							
•	<ol> <li>Disposable income is determined under 11 U.S.C. § 1325(b)(3).</li> </ol>							
	3. The commitment period is 3 years.							
	4. The commitment period is 5 years.							

☐ Check if this is an amended filing

### Official Form 22C-1

# **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

12/14

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
  - Not married, Fill out Column A, lines 2-11.
  - ☐ Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

				Colur Debte		Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime, and comall payroll deductions).	nmissi	ons (before	\$	12,443.50	\$	
3.	<b>Alimony and maintenance payments.</b> Do not include payment Column B is filled in.	s from	a spouse if	\$	0.00	\$	
4.	All amounts from any source which are regularly paid for he of you or your dependents, including child support. Include from an unmarried partner, members of your household, your deand roommates. Include regular contributions from a spouse on filled in. Do not include payments you listed on line 3.	regula epende	r contributions nts, parents,	\$	0.00	\$	
5.	Net income from operating a business, profession, or farm						
	Gross receipts (before all deductions) \$	0.00					
	Ordinary and necessary operating expenses -\$	0.00					
	Net monthly income from a business, profession, or farm \$	0.00	Copy here ->	\$	0.00	\$	
6.	Net income from rental and other real property						
	Gross receipts (before all deductions) \$	0.00					
	Ordinary and necessary operating expenses -\$	0.00					
	Net monthly income from rental or other real property \$	0.00	Copy here ->	\$	0.00	\$	

Official Form 22C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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Debtor 1	Kenneth A Nekic		Case number	(if known)		
			Column A Debtor 1		Column B Debtor 2 or non-filing sp	oouse
7. In	terest, dividends, and royalties		\$	0.00	\$	
	nemployment compensation		\$	0.00	\$	
Do	o not enter the amount if you contend that the amount received was a beneater the Social Security Act. Instead, list it here:	efit	·			
	· · · · · · · · · · · · · · · · · · ·	00				
	For you \$ 0. For your spouse \$					
9. <b>P</b> e	ension or retirement income. Do not include any amount received that was	as a	\$	0.00	\$	
Do re do	come from all other sources not listed above. Specify the source and a continctude any benefits received under the Social Security Act or payment of a security and a crime against humanity, or international comestic terrorism. If necessary, list other sources on a separate page and patal on line 10c.	nts al or				
	10a		\$	0.00	\$	
	10b		\$	0.00	\$	
	10c. Total amounts from separate pages, if any.	+	\$	0.00	\$	
	alculate your total average monthly income. Add lines 2 through 10 for ach column. Then add the total for Column A to the total for Column B.  Determine How to Measure Your Deductions from Income	\$1	2,443.50	+ \$		Total average monthly income
13. <b>C</b> €	You are married and your spouse is filing with you. Fill in 0 in line 13d.					
	Fill in the amount of the income listed in line 11, Column B, that was NC dependents, such as payment of the spouse's tax liability or the spouse In lines 13a-c, specify the basis for excluding this income and the amount adjustments on a separate page.	's suppo	ort of someon	e other th	nan you or your	dependents.
	If this adjustment does not apply, enter 0 on line 13d.	æ				
	13a13b	\$ \$		_		
	13c.	+\$		<del></del>		
	13d. Total	\$	0.00	c。	py here=> 13d.	- 0.00
14. <b>\</b>	Your current monthly income. Subtract line 13d from line 12.				14.	\$12,443.50
	Calculate your current monthly income for the year. Follow these steps				,_	12 442 50
1	15a. Copy line 14 here=>				15a.	\$12,443.50
	Multiply line 15a by 12 (the number of months in a year).				]	<b>x</b> 12
1	15b. The result is your current monthly income for the year for this part of	the form	1.		15b.	\$ 149,322.00

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Debto	or 1	Kenneth A Nekic		Case number (if known)			
16	Cal	ulate the median family income that applies to	NOU. Follow these steps				
10.		Fill in the state in which you live.	OH	•			
	TOA	Fill III the state in which you live.	<u> </u>				
	16b	Fill in the number of people in your household.	2				
	16c	Fill in the median family income for your state an			16c.	\$_	54,420.00
		To find a list of applicable median income amount instructions for this form. This list may also be a					
17.	Hov	do the lines compare?	anabio at the barmapie,				
	17a	☐ Line 15b is less than or equal to line 16c 11 U.S.C. § 1325(b)(3). <b>Go to Part 3.</b> Do					t determined unde
	17b	■ Line 15b is more than line 16c. On the to 1325(b)(3). Go to Part 3 and fill out Cal current monthly income from line 14 abo	culation of Disposable I				
Part	3:	Calculate Your Commitment Period Under 1	1 U.S.C. §1325(b)(4)				
18.	Cop	y your total average monthly income from line	11.		18. \$	\$	12,443.50
19.	Dec	uct the marital adjustment if it applies. If you a end that calculating the commitment period unde use's income, copy the amount from line 13d.	re married, your spouse is	s not filing with you, and you			
	If th	e marital adjustment does not apply, fill in 0 on lin	e 19a.		19a. <b>-</b> 9	<u> </u>	0.00
	Sub	tract line 19a from line 18.			19b.	\$	12,443.50
20	Cal	ulate your current monthly income for the year	Eallow those stope:				
20.		culate your current monthly income for the year Copy line 19b			20a.	•	12,443.50
	20a					Ψ_	<u> </u>
		Multiply by 12 (the number of months in a year).					<b>x</b> 12
	20b	The result is your current monthly income for the	vear for this part of the fo	orm	20b.	\$	149,322.00
	_00		year tor and part of and it			Ľ	· · · · · · · · · · · · · · · · · · ·
	20c	Copy the median family income for your state ar	d size of household from	line 16c		\$	54,420.00
					•		_
	21.	How do the lines compare?					
		☐ Line 20b is less than line 20c. Unless other period is 3 years. Go to Part 4.	wise ordered by the court,	on the top of page 1 of this form	n, check	box 3,	The commitment
		■ Line 20b is more than or equal to line 20c. commitment period is 5 years. Go to Part 4		by the court, on the top of page	1 of this	form, o	check box 4, The
Part	4:	Sign Below					
		igning here, under penalty of perjury I declare tha	t the information on this s	tatement and in any attachments	s is true a	and co	rrect.
¥	( le	Kenneth A Nekic					
•		nneth A Nekic					
	•	nature of Debtor 1					
	Date	June 24, 2015 MM / DD / YYYY					
	If yo	u checked 17a, do NOT fill out or file Form 22C-2	•				
	If yo	u checked 17b, fill out Form 22C-2 and file it with	this form. On line 39 of th	nat form, copy your current month	nly incon	ne fron	n line 14 above.

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					•			
Fill in	this information to	identify your case:						
Debtor	Kenneth	A Nekic						
Debtor	. 2							
	se, if filing)							
United	States Bankruptcy C	ourt for the: Southe	rn District of Ohio					
Case r	number wn)					☐ Check if this	s is an amende	ed filing
	I Form 22C-2							
Cha	pter 13 Cald	culation of `	Your Dispos	sable li	ncome			12/14
Comm Be as c	itment Period (Offici complete and accura	ill need your comple al Form 22C-1). ate as possible. If tw separate sheet to thi	o married people a	re filing tog	ether, both are equ	ually responsible	e for being acc	urate. If more
		ir name and case nu						. ,
Part 1:	Calculate Your	Deductions from You	our Income					
the info Ded expe 22C	questions in lines 6 rmation may also be luct the expense amo enses if they are high -1, and do not deduct	ervice (IRS) issues No15. To find the IRS expanded at the balants set out in lines 6 er than the standards any amounts that your month to month, expanded is the standard of the standard set any amounts that your month, expanded is the standard set any amounts that your month to month, expanded is the standard set any amounts that your month to month, expanded is the standard set and	standards, go onlin nkruptcy clerk's off -15 regardless of you . Do not include any ou subtracted from yo	ne using the lice.  ur actual expoperating expour spouse's	link specified in the ense. In later parts penses that you sul	of the form, you obtracted from inc	ructions for thi	s form. This your actual
II yo	our expenses differ fro	om month to month, e	nier ine average exp	ense.				
Note		are not used in this for				a similar form us	ed in chapter 7	cases.
5.	The number of peo	ple used in determine	ning your deductior	ns from inco	ome			
		people who could be any additional depend e in your household.					2	
Nati	ional Standards	You must use th	ne IRS National Stand	dards to ans	wer the questions ir	lines 6-7.		
6.		d other items: Using dollar amount for foo			d in line 5 and the II	RS National	\$	1,092.00
7.	the dollar amount fo people who are 65 c	th care allowance: L r out-of-pocket health or olderbecause olde amount, you may de	care. The number of er people have a high	of people is sp ner IRS allow	olit into two categori ance for health car	espeople who	are under 65 and	d

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Debtor 1 Kenneth A Nekic Case number (if known)
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Peop	le who are under 65 years of age	
7	7a. Out-of-pocket health care allowance per person	\$ <b>60</b> _
7	7b. Number of people who are under 65	X2
7	7c. <b>Subtotal.</b> Multiply line 7a by line 7b.	\$120.00 Copy line 7c here=> \$120.00
Peop	le who are 65 years of age or older	
7	7d. Out-of-pocket health care allowance per person	\$ <u>144</u>
7	7e. Number of people who are 65 or older	×0
7	7f. Subtotal. Multiply line 7d by line 7e.	\$ \$ Copy line 7f here=> \$ 0.00
7	<sup>7</sup> g. <b>Total.</b> Add line 7c and line 7f	\$ 120.00 Copy total here=> 7g. \$ 120.00
Local	Standards You must use the IRS Local Standards t	o answer the questions in lines 8-15
Base	d on information from the IRS, the U.S. Trustee Pro	gram has divided the IRS Local Standard for housing for
	ruptcy purposes into two parts: ing and utilities - Insurance and operating expense:	•
hous	ing and utilities - Mortgage or rent expenses	
sepai 8. I	ate instructions for this form. This chart may also b	enses: Using the number of people you entered in line 5,
	, ,	ce and operating expenses.
	Housing and utilities - Mortgage or rent expenses:	
Ş	2a. Using the number of people you entered in line 5, f listed for your county for mortgage or rent expense	
ę	9b. Total average monthly payment for all mortgages a	• •
	To calculate the total average monthly payment, accontractually due to each secured creditor in the 60 for bankruptcy. Next divide by 60.	
	Name of the creditor	Average monthly payment
	Ronald B Hager	\$\$
	9b. Total average monthly paymer	Copy line 9b here=> -\$ Repeat this amount on line 33a.
Ç	9c. Net mortgage or rent expense.	
	Subtract line 9b (total average monthly payment) for rent expense). If this number is less than \$0, en	
	f you claim that the U.S. Trustee Program's division affects the calculation of your monthly expenses, fil	n of the IRS Local Standard for housing is incorrect and I in any additional amount you claim.

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Debtor 1	Kenneth A Nekic		С	ase number ( <i>il</i>	known)		
11.	Local transportation expenses: Check the number of veh	hicles for which	you claim a	n ownershi	p or operating	g expense.	
	□ 0. Go to line 14.						
	■ 1. Go to line 12.						
	☐ 2 or more. Go to line 12.						
12.	<b>Vehicle operation expense:</b> Using the IRS Local Standard operating expenses, fill in the <i>Operating Costs</i> that apply for						212.00
13.	<b>Vehicle ownership or lease expense:</b> Using the IRS Local You may not claim the expense if you do not make any load more than two vehicles.	,			•	•	
Vel	hicle 1 Describe Vehicle 1:						
13a.	Ownership or leasing costs using IRS Local Standard		13a.	\$	0.00		
13b.	Average monthly payment for all debts secured by Vehicle Do not include costs for leased vehicles.	1.					
	To calculate the average monthly payment here and on line are contractually due to each secured creditor in the 60 mobankruptcy. Then dived by 60.						
	Name of each creditor for Vehicle 1	Average ment	onthly				
	-NONE-	\$\$		_			
			Copy 13 here =>			Repeat this amount on line 33b.	
13c.	Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this amount is less than \$	\$0, enter \$0.				Copy net Vehicle 1 expense	
			13c.	\$	0.00	here => \$	0.00
Vel	hicle 2 Describe Vehicle 2:					_	
13d.	Ownership or leasing costs using IRS Local Standard		13d.	\$	0.00		
13e.	Average monthly payment for all debts secured by Vehicle leased vehicles.	2. Do not inclu	de costs for				
	Name of each creditor for Vehicle 2	Average months	onthly				
		\$					
			Copy 13 here =>	_	0.00		
13f.	Net Vehicle 2 ownership or lease expense Subtract line 13e from line 13d. if this number is less than \$2.50.	\$0, enter \$0.	13f.	\$	0.00	Copy net Vehicle 2 expense here => \$	0.00
1.4	Public transportation expense: If you claimed 0 vehicles	in line 11 usin	a tha IDS I a	cal Standa	rde fill in the	Public	_
	Transportation expense allowance regardless of whether ye	ou use public tr	ansportation		•	\$	0.00
15.	<b>Additional public transportation expense:</b> If you claimed also deduct a public transportation expense, you may fill in not claim more than the IRS Local Standard for <i>Public Tran</i>	what you belie					0.00

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Debtor 1 Kenneth A Nekic Case number (if known)

Oth	ln addition to the expense deductions listed above, you are allowed your monthly expenses the following IRS categories.	for	
16.	<b>Taxes:</b> The total monthly amount that you will actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes.  Do not include real estate, sales, or use taxes.	\$	0.00
17	Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement		_
	contributions, union dues, and uniform costs.		0.00
	Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$	0.00
18.	<b>Life Insurance:</b> The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance.  Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.	\$	0.00
19.	Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments.		
	Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35.	\$	870.00
20.	<b>Education:</b> The total monthly amount that you pay for education that is either required: as a condition for your job, or	œ.	0.00
	for your physically or mentally challenged dependent child if no public education is available for similar services.	\$	0.00
21.	Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.	\$	0.00
	Do not include payments for any elementary or secondary school education.	Ψ	0.00
22.	Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.		
	Payments for health insurance or health savings accounts should be listed only in line 25.	\$	0.00
23.	Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer.  Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 22C-1, or any amount you previously deducted.	+\$	0.00
24.	Add all of the expenses allowed under the IRS expense allowances.  Add lines 6 through 23.	\$	2,811.00
۸۵	ditional Expense Deductions These are additional deductions allowed by the Means Test.		
Aut	Note: Do not include any expense allowances listed in lines 6-24.		
25.	<b>Health insurance, disability insurance, and health savings account expenses.</b> The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents.	r	
	Health insurance \$		
	Disability insurance \$ 0.00		
	Health savings account + \$ 0.00		
	Total \$ 0.00 Copy total here=>	\$	0.00
	Do you actually spend this total amount?  No. How much do you actually spend?		
	■ Yes \$		
26.	Continued contributions to the care of household or family members. The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses.	\$	0.00
27.	<b>Protection against family violence.</b> The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply.		<b>-</b>
	By law, the court must keep the nature of these expenses confidential.	\$	0.00

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ebtor 1	Kenneth A Nekic	Cas	se number (if known)		
28.	Additional home energy costs. Your home allowance on line 8.	e energy costs are included in your non-mor	tgage housing and utilities		
	If you believe that you have home energy or non-mortgage housing and utilities allowand				
	You must give your case trustee documenta amount claimed is reasonable and necessa		show that the additional	\$	0.00
29.	Education expenses for dependent child \$156.25* per child) that you pay for your depublic elementary or secondary school.			or	
	You must give your case trustee documenta claimed is reasonable and necessary and necessary		explain why the amount		
	* Subject to adjustment on 4/01/16, and eve	ery 3 years after that for cases begun on or a	after the date of adjustment.	\$	0.00
	Additional food and clothing expense. The higher than the combined food and clothing than 5% of the food and clothing allowances	allowances in the IRS National Standards.			
	To find a chart showing the maximum additi instructions for this form. This chart may als				
	You must show that the additional amount of	claimed is reasonable and necessary.		\$	0.00
31.	<b>Continuing charitable contributions.</b> The instruments to a religious or charitable organ		n the form of cash or financ	ial \$	0.00
32.	Add all of the additional expense deducti Add lines 25 through 31.	ions		\$_	0.00
Ded	uctions for Debt Payment				
	ŕ				
	For debts that are secured by an interest i oans, and other secured debt, fill in lines		mortgages, vehicle		
7	Fo calculate the total average monthly paymed creditor in the 60 months after you file for bar	ent, add all amounts that are contractually de	ue to each secured		
	Mortgages on your home				age monthly
220	Capy line Oh hara			payr	
33a.			=>	, p_	1,737.00
	Loans on your first two vehicles			•	
33b.				·	0.00
33c.	Copy line 13e here		=>	· \$_	0.00
Nam	e of each creditor for other secured debt	Identify property that secures the debt	Does payment include taxes or insurance?		
			□ No		
224	-NONE-		☐ Yes	\$	
SSu.				Φ_	
			□ No		
220			☐ Yes	\$	
33e.				Φ_	
			□ No		
33f.			☐ Yes +	\$	
				*=	
33g.	Total average monthly payment. Add lines	33a through 33f	c 1 737 00 to	ppy al re=> \$	1,737.00

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34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents?  No. Go to line 35.  Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the cure amount). Next, divide by 60 and fill in the information below.  Name of the creditor  Identify property that secures the debt  Total cure amount  Monthly amount  Ronald B Hager  364-368 E. Whittier St Columbus, Ohio 43206  \$ 102,500.00 +60 = \$ \$ +60 = \$ \$ +60 = \$ \$ +60 = \$ \$ 1,708.33  Total  No. Go to line 36.  Yes. Fill in the total amount of all of these priority tax, child support, or alimonythat are past due as of the filling date of your bankruptcy case? 11 U.S.C. § 507.  No. Go to line 36.  Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.  Total amount of all past-due priority claims  S 96,675.00 +60 \$ \$ 36. Projected monthly Chapter 13 plan payment  Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Courts (for districts). To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.  Average monthly administrative expense  37. Add all of the deductions for debt payment.  Add all of the additional expense deductions.  Copy line 24, All of the expenses allowed under IRS expense allowances  Copy line 27, All of the additional expense deductions  Copy line 37, All of the deductions for debt payment	Debtor 1	Ken	neth A Nekic			Cas	se nu	mber (if known)			
■ Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the <i>cure amount</i> ).  Name of the creditor    Identify property that secures the debt   Total cure amount   Monthly amount							е,				
Total cure amount sets of your property (called the <i>cure amount</i> ).  Name of the creditor    Identify property that secures the debt   Total cure amount   Monthly cannount	п	No	Go to line 35								
Ronald B Hager  364-368 E. Whittier St Columbus, Ohio 43206  \$ 102,500.00	•		State any amount that listed in line 33, to kee	ep possession of your property (							
Ronald B Hager  Columbus, Ohio 43206  \$ 102,500.00	Name	of the	creditor	Identify property that secur	es the	debt	То	tal cure amount			
\$ \frac{\darksquares}{\darksquares} \fra	Ron	ald B	Hager			\$		102,500.00	÷ 60 =	\$	1,708.33
Sample   S				·		\$	-			. —	
\$ 1,708.33   total here=> \$ \$ 35. Do you owe any priority claims - such as a priority tax, child support, or alimony-that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507.   No. Go to line 36.   Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.   Total amount of all past-due priority claims   \$ 96,675.00						\$			÷ 60 = +	+\$	
that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507.  No. Go to line 36.  Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.  Total amount of all past-due priority claims.  \$ 96,675.00 ÷ 60 \$ \$  36. Projected monthly Chapter 13 plan payment  Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts).  To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.  Average monthly administrative expense  37. Add all of the deductions for debt payment.  Add lines 33g through 36.  Total Deductions from Income  38. Add all of the allowed deductions.  Copy line 24, All of the expenses allowed under IRS expense allowances  \$ 2,811.00  Copy line 32, All of the additional expense deductions  \$ 0.00						Total	\$_	1,708.33	tota	ĺ	1,708.33
Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.  Total amount of all past-due priority claims \$ 96,675.00 ÷ 60 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$											
ongoing priority claims, such as those you listed in line 19.  Total amount of all past-due priority claims \$ \text{96,675.00} \div \text{60} \\$ \$\  36. Projected monthly Chapter 13 plan payment \$ \text{Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.  Average monthly administrative expense  37. Add all of the deductions for debt payment. Add lines 33g through 36.  Total Deductions from Income  38. Add all of the allowed deductions.  Copy line 24, All of the expenses allowed under IRS expense allowances \$ \text{2,811.00}\$.  Copy line 32, All of the additional expense deductions \$ \text{0.00}\$.		No.	Go to line 36.								
36. Projected monthly Chapter 13 plan payment  Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.  Average monthly administrative expense  37. Add all of the deductions for debt payment. Add lines 33g through 36.  Total Deductions from Income  38. Add all of the allowed deductions.  Copy line 24, All of the expenses allowed under IRS expense allowances  \$ 2,811.00  Copy line 32, All of the additional expense deductions \$ 0.00	•	Yes.				nclude current or					
Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.  Average monthly administrative expense  37. Add all of the deductions for debt payment. Add lines 33g through 36.  Total Deductions from Income  38. Add all of the allowed deductions.  Copy line 24, All of the expenses allowed under IRS expense allowances  S 2,811.00  Copy line 32, All of the additional expense deductions  \$ 0.00			Total amount of all pa	ast-due priority claims			\$_	96,675.00	<u>÷</u> 6	0 \$	1,611.25
Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts).  To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.  Average monthly administrative expense  37. Add all of the deductions for debt payment.  Add lines 33g through 36.  Total Deductions from Income  38. Add all of the allowed deductions.  Copy line 24, All of the expenses allowed under IRS expense allowances  Copy line 32, All of the additional expense deductions  \$ 2,811.00  0.00	36. <b>P</b> r	ojecte	d monthly Chapter 13	plan payment			\$		_		
Average monthly administrative expense  \$	Of the To	fice of Exec find a li	the United States Court utive Office for United S st of district multipliers that	ts (for districts in Alabama and N States Trustees (for all other dist includes your district, go online using	North ( ricts). I the lin	Carolina) or by k specified in the	Х <sub>-</sub>		☐ Copy te	otal	
Add lines 33g through 36.  Total Deductions from Income  38. Add all of the allowed deductions.  Copy line 24, All of the expenses allowed under IRS expense allowances  Copy line 32, All of the additional expense deductions  \$ 0.00	Av	erage	monthly administrative	expense				\$			
38. Add all of the allowed deductions.  Copy line 24, All of the expenses allowed under IRS expense allowances \$ 2,811.00  Copy line 32, All of the additional expense deductions \$ 0.00				debt payment.						\$_	5,056.58
Copy line 24, All of the expenses allowed under IRS expense allowances \$ 2,811.00  Copy line 32, All of the additional expense deductions \$ 0.00	Total	Deduc	tions from Income								
expense allowances \$ 2,811.00  Copy line 32, All of the additional expense deductions \$ 0.00	38. <b>A</b> c	dd all d	of the allowed deduction	ons.							
			a allawanasa		\$	2,811.00	)_				
Copy line 37, All of the deductions for debt payment +\$ 5,056.58	C	Copy lir	ne 32, All of the addition	nal expense deductions	\$	0.00	<u>)</u>				
	C	Copy lir	ne 37, All of the deduction	ons for debt payment	+\$	5,056.58	3	_			
Total deductions \$\$ Copy total here=> \$	Т	otal de	eductions		\$	7,867.58	3	Copy total here=>	•	\$_	7,867.58

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Debtor 1	Kenneth A Ne	ekic			Case	e num	ber (if known)		
Part 2:	Determine Yo	our Disposable Income Under 11 U	.S.C. § 1325(b)	)(2)					
		rrent monthly income from line 14 Current Monthly Income and Calc						\$	12,443.50
<b>chi</b> dis rec	40. Fill in any reasonably necessary income you receive for support children. The monthly average of any child support payments, foster disability payments for a dependent child, reported in Part I of Form 2 received in accordance with applicable nonbankruptcy law to the extended necessary to be expended for such child.				yments, or nat you	\$		0.00	
em in 1	41. Fill in all qualified retirement deductions. The monthly total of all a employer withheld from wages as contributions for qualified retirement in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from respecified in 11 U.S.C. § 362(b)(19).				as specified	\$		0.00	
42. <b>Tot</b>	al of all deducti	ons allowed under 11 U.S.C. § 707	<b>(b)(2)(A).</b> Copy	/ line 3	38 here=>	\$	7,86	7.58	
exp the	enses and you hir expenses. You	cial circumstances. If special circum have no reasonable alternative, descr I must give your case trustee a detail documentation for the expenses.	ribe the special	circui	nstances an	d			
Descri	be the special c	ircumstances		Amo	unt of expe	nse			
43a.	Business Exp	penses		\$	6,761	.17			
43b.			{	\$			-		
43c.				\$					
43d.	Total. Add lines	43a through 43c.	\$_		6,761.17		py 43d re=> \$	6,761.17	
44. <b>To</b> t	tal adjustments.	Add lines 40 through 43d.			=> [	S	14,628.75	Copy total here=> -\$	14,628.75
45. <b>Ca</b>	45. Calculate your monthly disposable income under § 1325(b)(2). Subtract line 44 from line 39.								
Part 3:	Change in Inc	come or Expenses							
46. Change in income or expenses. If the income in Form 22C-1 or the expenses you reported in this form have changed or are virtually certain to change after the date you filed your bankruptcy petition and during the time your case will be open, fill in the information below. For example, if the wages reported increased after you filed your petition, check 22C-1 in the first column, enter line 2 in the second column, explain why the wages increased, fill in when the increase occurred, and fill in the amount of the increase.									
Form	Line	Reason for change		Da	te of change		Increase or decrease?	Amount of	change
☐ 22C- ☐ 22C- ☐ 22C- ☐ 22C- ☐ 22C- ☐ 22C- ☐ 22C- ☐ 22C-	-2 -1 -1 -1						☐ Increase☐ Decrease☐ Increase☐ Increase☐ Increase☐ Decrease☐ Increase☐ Decrease☐ Dec	\$ \$ \$	

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Debtor 1	Kenneth A Nekic	Case number (if known)
Part 4:	Sign Below	
В	y signing here, under penalty of perjury you declare that the informa	ation on this statement and in any attachments is true and correct.
	/s/ Kenneth A Nekic	
	Kenneth A Nekic Signature of Debtor 1	
_	June 24, 2015 MM / DD / YYYY	